FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am § Secretary of State

03-01-1999 90014 030 ****61.25

DOCUMENT #	N40302
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1. Corporation Name

VENICE TAXPAYERS LEAGUE, INC.					
Principal Place P O BOX 118 VENICE FL 34		Mailing Address P O BOX 118 VENICE FL 34284			
				(seasifier att Esait gener sitt etsine tret aten.	LEBOT BIBLE BEBEL BEBEL BEBEL
2. Principal P	lace of Business	2a. Mailing Address		Date Incorporated or Qualifed	
21		26		10/08/1990	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		65-0265711	Not Applicable
City & Stat	e	City & State		5. Certifcate of Status Desired	\$8.75 Additional
23	Country	Zip	Country	S. Flatin Dannin Financia	\$5.00 May Be
24 Zip	25	<u> </u>	50011119	6. Election Campaign Financing Trust Fund Contribution	Added to Fees
[24]	9. Name and Address of Current		T	10. Name and Address of New Registers	
	or Idams and rear out or contain	g	81 Name	1 1/1/1/	
DEAKE O	1140150		99 8	Levine, - Herbert L.	
PEAKE, C			82 Street A	Address (P.O. Box Number is Not Acceptable)	S.
ì	REST DRIVE		83	^	
VENICE F	L 34285				lool 75- Code
}			84 City	Venice F	2 Sip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617,1508, Florida Statutes	the above-named of		
office or r	egistered agent, or both, in the State of	of Florida, Such change was aut	horized by the corpo	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	ointment as registered
1	m raininal with, and accept the obliga-	grisco, section o 77.0003, Florid	a cialolos.	1/2,	/49.
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature re		
12.	OFFICERS ANI	DIRECTORS ,	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	M DELETE	1.1 T/TLE	PD	Change X Addition
NAME :	PEAKE, CHARLES		1.2 NAME	PD Levine, Herbert L. 802 Harbor Dr.S. Venice FL	ļ
STREET ADDRESS	440 BAYCREST DRIVE		1.3 STREET ADDRESS	802 Harbor Dr.S.	
CITY-ST-ZIP	VENICE FL		1.4 CITY-ST-ZIP	Venice FL	
TITLE	DV ·	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	STOUT, ROY		2.2 NAME		ļ
STREET ADDRESS	812 RIALTO		2.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL		2.4 CITY-ST-ZIP		
TITLE	DS	☐ DELETE	3.1 TITLE		. Change Addition
NAME	WEINBERG, GERI		3.2 NAME		
STREET ADDRESS	740 BIRD BAY DRIVE		3.3 STREET ADDRESS		· P
CITY-ST-ZIP	VENICE FL:		3.4. CITY-ST-ZIP		
TITLE	D	₩ DELETE	4.1 TITLE	•	
NAME	;EVOME. J		4. 2 NAME		
STREET ADDRESS	802 HARBOR DR		4.3 STREET ADDRES	•	•
CITY-ST-ZIP	VENICE FL		4.4 CITY-ST-ZIP		Ave. 34292
TITLE	D	DELFTF	517III F		[

D Marion Truzzalino, 740 Gulf Drive 34285 D Ronald Mealey, 762 Village Cir. 34285

Venice Taxpayor's League, THE BOT Change Addition

6.4 CITY-ST-ZIP VENICE FL 34285 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRES

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

MCDERMETT, JANICE

VENICE FL

VENUTI, J

DT

1234 SLEEPY HOLLOW LANE

1150 TARPON CENTER DR

REQUIRED SNING OFFICER OR DIRECTOR

DELETE